1/	2	1
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Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Ellective October 1, 2000												
CLAIMS AS			S FILED - PART I (Column 1) (Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS					R/	TE	FEE		RATE	FEE		
FOR		NUMBER FILED		NUMBER EXTRA		BAS	C FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			3 / minus 20= * [/			X	S 9=		OR	X\$18=	198	
INDEPENDENT CLAIMS 7 minus 3 =			*		X	X40=		OR	X80=			
MULTIPLE DEPENDENT CLAIM PRESENT							35=	 		+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						ļ			OR		508	
							10	TAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					SM	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY			
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY I,FOR	PRESENT EXTRA	RA	ΛΈ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL/ FEE /
AMENDMENT	Total	. 30	Minus	**3		1	X\$	9=		OR	X\$18=	
AME	Independent	· 3	Minus	***3	T. C.I. A.I.I.		X	10=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	35=		OR	+270=		
BEST AVAILABLE COPY							OTAL T. FEE		OR	TOTAL ADDIT. FEE	/	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	R/	ATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.45	Minus	**	}/_	= (7	X	9=		OR	X\$18=	
	Independent FIRST PRESE	NTATION OF M	Minus ULTIPLE DEP	*** S	T CLAIM	=	Χ	10=		OR	X80=	
	1- ₂₁			.*	· · · · · · · · · · · · · · · · · · ·		+1	35=		OR	+270=	
l								OTAL T. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)			mn 2)	(Column 3)	-					*
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X/	-0=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIN	1	l					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												